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30542	7590 04/09	/2007	nave		ficate of Mailin		mission
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SAN DIEGO, CA	X 92138-0278		trans	smitted to the USPT	O (571) 273-288	35, on the d	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DO	CKET NO.	CONFIRMATION NO.
10/646,913			Herbert Peter Jennissen		034258-1401		8136
TITLE OF INVENTION MATERIALS			MEDIATOR MOLECU		•		MPLANT
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL	FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$	1000	07/09/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS				
NAFF, DAVID M		1657	424-423000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AN	ID RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or typ	ne)			
PLEASE NOTE: Unle recordation as set forth	ess an assignee is identi in 37 CFR 3.11. Comp	fied below, no assignee detion of this form is NO	data will appear on the pa T a substitute for filing an a	itent. If an assignee assignment.	is identified b	elow, the de	ocument has been filed for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Morphoplant GMBH			Bochum, Fed Rep Germany				
Please check the appropria	ate assignee category or	categories (will not be pr	rinted on the patent):	Individual XXCon	poration or other	r private gro	up entity Government
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Authorized Signature	Bangl	Wiln	**************************************	DateJu	ly_6, 2	2007	
	Barry S. W	•	***************************************	Registration No.		***************************************	
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